

APPENDIX A

DEPARTMENT OF MENTAL HEALTH

Section 536.175, RSMo, Administrative Rule Review

July 1, 2021 – June 30, 2022

Comment Appendix

9 CSR 30-3.032 Certification of Substance Use Disorder Prevention and Treatment Programs

COMMENT #1: A staff member requested that paragraph (4)(A)1. to 4. be removed and subsection (4)(A) be amended to state, “Organizations requesting certification must comply with 9 CSR 10-7.130, Procedures to Obtain Certification, by submitting a fully completed application to the department.”

RESPONSE AND EXPLANATION OF CHANGE: The rule has been amended as requested.

9 CSR 30-3.100 General Requirements for Substance Use Disorder Treatment Programs

COMMENT #1: A staff member requested that Qualified Addiction “Specialist” in subsection (2)(B) be changed to Qualified Addiction “Professional”.

RESPONSE AND EXPLANATION OF CHANGE: The language has been changed as requested.

9 CSR 30-3.110 Service Definitions, Staff Qualifications, and Documentation Requirements for Substance Use Disorder Treatment Programs

COMMENT #1: George Oestreich, Pharm.D., MPA, Principal, G.L.O. & Associates, provided comments regarding subsection (1)(O) medication services, and subsection (1)(P) medication services support.

Dr. Oestreich commented that pharmacists are, by education and training, drug experts. Missouri citizens should be allowed access to pharmacists when participating in the key service functions such as screening for and educating on medication side effects, changing medication orders, and consulting on medication monitoring and management, as included in this service.

As promulgated by the Missouri Pharmacy Practice Act (RSMo, 338.010) and defined by the Missouri Board of Pharmacy in 20 CSR 20-2220-6.070 and 20 CSR 2220-6.080, pharmacists can work under a collaborating practice agreement, referred to as a medication therapeutic plan or medication therapy services (MTS) by pharmacists, to make necessary therapy changes similar to an APRN. Pharmacists are highly qualified healthcare professionals capable of performing the key services listed above.

There is specialized training that many Missouri pharmacists have acquired in managing psychotropic medications. The Department of Mental Health already recognizes and lists, "A psychiatric pharmacist as defined in 9 CSR 30-4.030" as a Qualified Mental Health Professional (QMHP) in 9 CSR 10-7.140

We recommend that pharmacists be included in the list of providers who are qualified and can provide medication services and medication services support.

RESPONSE AND EXPLANATION OF CHANGE: The department appreciates the comments from Dr. Oestreich. Due to staff requirements included in the current Medicaid State Plan Amendment for the Comprehensive Substance Treatment and Rehabilitation (CSTAR) Program,

pharmacists cannot be added at this time. When the CSTAR State Plan is opened in the future to make necessary program changes, the department will consider the addition of pharmacists as qualified practitioners of the CSTAR agency to provide medication services and medication services support. This will be subject to approval by the Centers for Medicare and Medicaid. Not all certified CSTAR programs employ or have a contractual relationship with a pharmacist(s) to provide services, therefore, their addition as a qualified provider may benefit a limited number of programs throughout the state.

COMMENT #2: A staff member requested that “Inc.” be removed from “Missouri Credentialing Board” in section (3), as that is incorrect.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and made this change

9 CSR 30-3.132 Opioid Treatment Programs

COMMENT #1: A department staff member requested “antagonist” be added to the types of medications included in subsection (2)(A).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will add “antagonist” to section (2)(A).

COMMENT #2: A department staff member requested “licensed physician” be changed to “qualified prescriber” in paragraph (2)(B)1.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will change the language as requested.

COMMENT #3: A department staff member requested “program physician” be changed to “qualified prescriber” in the second sentence of paragraph (2)(B)3.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will change the language as requested.

9 CSR 30-3.150 Comprehensive Substance Treatment and Rehabilitation (CSTAR)

COMMENT #1: A staff member requested that “and credentialing” be added to the end of the sentence in subparagraph (1)(D)1.D.

RESPONSE AND EXPLANATION OF CHANGE: The rule has been amended as requested.

COMMENT #2: A staff member requested an apostrophe be added to “individual” before “record” in paragraph (3)(B)2. so it reads, “individual’s record”.

RESPONSE AND EXPLANATION OF CHANGE: The rule has been amended as requested.

9 CSR 30-3.195 Outpatient Substance Use Disorder Treatment Programs

COMMENT #1: A staff member requested the following be added to section (3): “Each individual served or parent/guardian must provide informed, written consent to treatment prior to delivery of services, and a copy of the consent form must be retained in the individual’s record. Consent to treat documentation shall be updated annually, as applicable.”

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and will add this language to section (3).

COMMENT #2: A staff member requested paragraph (3)(B)1. be revised to state, “Each individual shall participate in the development of his/her treatment plan.” The remaining language regarding the signature of individuals served or that of their parent/guardian on the treatment plan should be removed as that is no longer required.

RESPONSE AND EXPLANATION OF CHANGE: The department will make this change to paragraph (3)(B)1.

9 CSR 30-4.035 Eligibility Determination, Assessment, and Treatment Planning in Community Psychiatric Rehabilitation Programs

COMMENT #1: A department staff member commented that “mental health” should not be removed from subsection (2)(A).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and made this change.

COMMENT #2: A department staff member requested that “or date of admission if eligibility determination was not completed” be added to the end of the sentence in section (4).

RESPONSE AND EXPLANATION OF CHANGE: The department concurs and added this language.

COMMENT #3: A department staff member requested that “or date of admission to CPR if eligibility determination was not completed” be added to the end of the sentence in section (6), and remove the word “for” from the sentence.

RESPONSE AND EXPLANATION OF CHANGE: The department concurs and added this language as requested.

9 CSR 30-4.043 Service Provision, Staff Qualifications, and Documentation Requirements for Community Psychiatric Rehabilitation Programs

COMMENT #1: Department staff requested that licensed mental health professional (LMHP), qualified addiction professional (QAP), and community support specialist with population-specific experience providing community support services in accordance with the key service functions for community support services as specified in 9 CSR 30-4.047(5)(B) be added to subsection (2)(F).

RESPONSE AND EXPLANATION OF CHANGE: The department concurs and made this change.

COMMENT #2: Department staff requested that “which may include review of the health screen information, healthcare concerns discussed, and health and wellness goals included in the individual’s treatment plan” be removed from paragraph (2)(J)3. because it is not applicable to this program.

RESPONSE AND EXPLANATION OF CHANGE: The department concurs and removed the language as requested.

COMMENT #3: Department staff requested the following changes be made to part (3)(G)2.B.(I): the year of publication of the incorporated by reference document be changed to the 2021 edition; Version 2.0 be added after DC:0-5TM; the word “Development” be changed to “Developmental” in the document title; and the address be changed to 2445 M Street NW, Suite 600, Washington, DC 20037.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and made the requested changes.

COMMENT #4: Department staff requested the date of the incorporated by reference document in paragraph (3)(N)1. be changed to 2018 and December be removed.

RESPONSE AND EXPLANATION OF CHANGE: The department concurs and made the requested change.

9 CSR 30-4.045 Intensive Community Psychiatric Rehabilitation (ICPR)

COMMENT #1: In reviewing this proposed amendment, department staff determined that additional information is necessary in subsection (1)(B) to clarify the process for interested service providers to submit a proposal to provide ICPR.

RESPONSE AND EXPLANATION OF CHANGE: The sentence in subsection (1)(B), “Written proposals shall be submitted to the department in accordance with established protocol” has been changed to, “Written proposals shall be submitted to the department and must include the following:” The department also modified the amendment by adding new paragraph (1)(B)1. through 9. which includes information that must be submitted with a proposal to provide ICPR.

COMMENT #2: Department staff requested that “at the individual’s place of residence” be added to the end of the first sentence in paragraph (3)(B)1.

RESPONSE AND EXPLANATION OF CHANGE: The department concurs and added the language as requested.

COMMENT #3: Department staff requested that “Regular treatment plan reviews” be removed from subsection (4)(F) and the sentence be revised to state, “At a minimum, quarterly treatment plan reviews shall occur to ensure individuals are receiving the appropriate level of services to meet needs and goals; and”

RESPONSE AND EXPLANATION OF CHANGE: The department concurs and made this change.

COMMENT #4: Department staff requested that “comprehensive behavioral health assessment” be changed to “intake evaluation” in subsection (5)(B).

RESPONSE AND EXPLANATION OF CHANGE: The department concurs and made this change.

COMMENT #5: Department staff requested that paragraph (5)(B)3. be revised to state, “Treatment plans shall be developed upon admission and be updated at least quarterly, or more frequently if clinically indicated.”

RESPONSE AND EXPLANATION OF CHANGE: The department concurs and made this change.

COMMENT #6: Department staff requested that “must be supervised by a psychiatrist” be removed from subsection (6)(C).

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and removed this language.

COMMENT #7: Department staff requested that “physician assistant” and “assistant physician” be added to paragraph (6)(C)1.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and made this change.

COMMENT #8: Department staff requested that staff ratios be added to section (12) as follows: There shall be one (1) staff person for every two (2) individuals served during waking hours. The ratio for staff to individuals served may decrease to one (1) staff to six (6) individuals during sleeping hours.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and added staff ratios as new subsection (6)(F).

9 CSR 30-4.046 Psychosocial Rehabilitation (PSR) in Community Psychiatric Rehabilitation

COMMENT #1: Department staff requested that “until accreditation is obtained” be added to the end of the last sentence in section (1).

RESPONSE AND EXPLANATION OF CHANGE: The department concurs and added this language.

9 CSR 30-4.190 Outpatient Mental Health Treatment Programs

COMMENT #1: Department staff requested the following changes be made to subsection (4)(E): “mental health professional” be added back into the sentence; “diagnostician” be deleted; and 9 CSR 10-7.140 be changed to 9 CSR 30-4.035(2)(A).

RESPONSE AND EXPLANATION OF CHANGE: Department staff concur and made these changes.